

NORTH BRANFORD POLICE DEPARTMENT

APPLICATION FOR PERMIT FOR VENDING OR SOLICITING

State Sales Tax Number _____

DATE OF APPLICATION _____

TYPE OF PERMIT	
VENDOR _____	SOLICITOR _____

TOWN OF _____
FEE FOR PERMIT _____

NAME OF APPLICANT _____
LAST
FIRST
MIDDLE

ADDRESS _____
NUMBER
STREET
CITY/TOWN
STATE
ZIP

TELEPHONE # OF APPLICANT () _____ DATE OF BIRTH _____

OPERATOR'S LICENSE # & STATE _____ HEIGHT _____ WEIGHT _____

EYE COLOR _____ HAIR COLOR _____

DESCRIPTION OF ITEMS TO BE SOLD OR SOLICITED _____

ARREST RECORD (other than motor vehicle charges)

CHARGE	DISPOSITION	DATE	CITY & STATE OF ARREST

VEHICLE TO BE USED (if any)

MAKE _____ MODEL _____

COLOR _____ YEAR _____ REGISTRATION # AND STATE _____ / _____
NUMBER
STATE

Issuance of this permit is subject to the ordinance of the Town of North Branford and the Connecticut General Statutes governing the issuance of soliciting and vending permits.

Signature of Applicant: _____

Chief of Police: _____

Approved: _____ Denied: _____